

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ink</i>		08-2-2
O.I.P.E. CLASSIFIER		1/3	8/28/01
FORMALITY REVIEW	YG	956	09/20/01
RESPONSE FORMALITY REVIEW	A. M.	5C 580	01-11-02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	20	3
2	✓	21	6
3	✓	22	12
4	✓	23	15
5	✓	24	15
6	✓	25	15
7	✓	26	15
8	✓	27	15
9	✓	28	15
10	✓	29	15
11	✓	30	15
12	✓	31	15
13	✓	32	15
14	✓	33	15
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16	✓	35	15
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18	✓	37	15
19	✓	38	15
20	✓	39	15
21	✓	40	15
22	✓	41	15
23	✓	42	15
24	✓	43	15
25	✓	44	15
26	✓	45	15
27	✓	46	15
28	✓	47	15
29	✓	48	15
30	✓	49	15
31	✓	50	15

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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373

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01-14-02